

## **BJN Education Matters: October 2019**

### ***The NHS Interim People Plan: implications for nurse education***

The National Health Service (NHS) is the largest employer in the United Kingdom and provides a fundamental service to the population. Maintaining recruitment and retention of staff is clearly central to care quality now and in the future. In June, the NHS Interim People Plan (IPP) (NHS 2019) was published to address workforce requirements to deliver care priorities over the next 10 years as outlined in the NHS Long Term Plan (2019a). Whilst there are health care staff shortages in a number of fields, by far the most urgent relates to the nursing workforce. Currently there are 40,000 vacancies in substantive nursing posts, across all hospital and community services, with significant shortages in mental health and community nursing (NHS 2019). Moreover, care demand is growing due an ageing population and advances in medical science. What part does pre-registration nursing play in the IPP proposals and what are the implications for its delivery within university and practice settings?

The vision for the IPP is to map out the immediate challenges and actions to address workforce concerns in 2019/20. The proposed action plans are based upon a review of the evidence around healthcare workforce recruitment and retention. Two major themes emerged: first an analysis of the working culture prevalent in the NHS and second the quality of leadership and ensuring inclusivity. Pre-registration implications should be reflected in nursing curricula and the quality of practice learning environments; these will be essential to make the IPP improvement vision a reality.

#### **Making the NHS the best place to work**

The report recognises that healthcare work attracts highly dedicated and committed people who want to give high quality care. However, the evidence suggests that job satisfaction is compromised by a culture in places of bullying and harassment, particularly for Black and Minority Ethnic (BME) staff. In addition, workload pressures are high leading to increasing levels of stress and burnout amongst students as well as trained staff (HEE 2019). Suggested interventions include:

- In practice settings: a zero tolerance of bullying; clear policies around raising concerns, harassment and health and wellbeing. Role modeling of supportive staff behaviours by practice assessor nurses; effective links with university-based practice support staff and academic advisers to address concerns in a timely manner.
- In university: Pre-registration curricular content to include equality and diversity education; elegant challenging skills (Thompson 2017) to ensure humanised care and collegial relations; reflective practice seminars linked to personal resilience development.

#### **Improving our leadership culture**

The link between person-centred leadership cultures and engaged staff leading to improved productivity is outlined in the IPP. However, in places this is an aspiration rather than a reality, leading to staff feeling unsupported and

devalued. Inclusive and compassionate leaders are needed at all levels of the organisation but not least at Band 6 and 7 where 'shop-floor staff' engage with clinical leaders every day. Suggested interventions include:

- In practice settings: Practice assessors and clinical leads should demonstrate engaged and inclusive leadership styles to include the diversity and talents of the student population, so they feel valued as people rather than just 'pairs of hands'.
- In university: the concept of self-leadership (Bryant and Kazan, 2012) should be embedded from year one until final placement so that skills are taught and embedded as part of the emerging Registered nurse role; this will challenge perceptions that leadership is only for those with leader in their job title.

### **Recruiting and retaining nursing students**

One section of the IPP focuses on specific issues around nursing. Looking at the pre-registration element, there is an ambitious plan to significantly increase student numbers by expanding placement capacity by 5000 this year as well as looking for further growth in future. Health and wellbeing issues were acknowledged in preventing attrition as well as some help with placement related financial support; this is a significant source of student stress. However, there was no commitment to reintroduce bursaries or grants, which was seen as a missed opportunity by the Council of Deans (CoD 2019).

In conclusion, the IPP is comprehensive and ambitious, particularly in terms of timescale. Whilst making areas of responsibility clearer, it underplays perhaps the complexity of nurses' (both students and registered staff) decisions to leave or stay in the profession. The picture is complex and requires sustained investment and leadership. However, it is a positive step forward; we can reflect on progress when the full NHS people plan is released next year.

### **References**

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